## MARYLAND BOARD OF PHARMACY



## MARYLAND PHARMACY LAWS

## LAW BOOK REQUEST FORM

Thank you for requesting the Maryland Pharmacy Laws Book. The law book is now available in hard copy (which includes a searchable CD) and an eBook version. To place an order, please print this form, complete it and mail with a check or money order payment. Please do not send cash.

Note: The CD is no longer available for separate purchase. EBook versions are not refundable. Please make checks/money orders payable to: Maryland Board of Pharmacy

Please mail the request form to: Maryland Board of Pharmacy

P O Box 1991

Baltimore, MD 21203-1991

Name:				
Organization:				
Mailing Address:				
City:			State:	Zip:
Telephone # ( )		Ext	Fax # ( )	
Email Address:				
	An email address	is required fo	r eBook request	s)
Type of Business (Check or	<u>ne):</u>			
Ph	armacy Chain	Independent	Legal/Re	gulatory
PharmacistPh	armacy Techniciar	nOther		
Number of Printed Copies:	@ \$35.00 each	n = \$	Total payme	nt
enclosed Your copy(s) will be				
Number of eBooks:				
EBook subscribers will be pro				
have Adobe Digital Editions in				
individual use of the "authorize transferred to any other individ				
conditions set forth by LexisNo		e indicates you	agree with the ai	oove and an other terms and
Sorialisms out form by Loxion	onio.			
Signature				
Thank you.				